

U.S. Department of Justice
United States Marshals Service

RECEIVED AND FILED

PROCESS RECEIPT AND RETURN

See instructions for "Service of Process by U.S. Marshal"

PLAINTIFF
United States of AmericaCOURT CASE NUMBER
09-1549 (ADC)DEFENDANT
\$750,000.00 fines served from Rosemont I, and Rosemont I Corporation et al,TYPE OF PROCESS
Final Order of Forfeiture/SettlementSERVE
AT

Marshals

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Number of process to be
served with this Form 285

1

Number of parties to be
served in this case

1

Check for service
on U.S.A.Teresa Zapata, Assistant United States Attorney
Chardón Tower, Suite 1201, 350 Carlos E. Chardón Street
San Juan, Puerto Rico 00918 - Telephone: 787-766-5656
Telecopier; 787-766-5398 Legal Aide M. Ruz - 787-282-1879SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

please see attach final order:

09-DEA-514616 \$2,115,757.25 - US shall forfeit \$255,000.00 in US Currency, and amount of \$1,860,757.25 to be return

09-DEA-514508 \$449,962.50

09-DEA-514613 \$72,602.50

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

787-766-5656

DATE

10/21/2010

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin
No. 69District to
Serve
No. 69

Signature of Authorized USMS Deputy or Clerk

Date

10/22/2010

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Myrna Cabello

Address (complete only different than shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Date

25 Oct 10

Time

3.10 PM

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

REMARKS:

02-DEA-403635

PRIOR EDITIONS
MAY BE USED

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

FORM USM-285
Rev. 12/15/80
Automated 01/00

AFD ☒ IN ☒
CIV ☐ OUT ☐
Item: 64